

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

Application or Docket Number

60810726

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |                     |                          |
|----------------------------------|---------------------|--------------------------|
| TOTAL CLAIMS                     | <i>4</i>            |                          |
| FOR                              | NUMBER FILED        | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | <i>4</i> minus 20 = | <i>0</i>                 |
| INDEPENDENT CLAIMS               | <i>1</i> minus 3 =  | <i>0</i>                 |
| MULTIPLE DEPENDENT CLAIM PRESENT |                     | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

| SMALL ENTITY |        | OTHER THAN<br>OR SMALL ENTITY |            |
|--------------|--------|-------------------------------|------------|
| RATE         | Fee    | RATE                          | Fee        |
| BASIC FEE    | 385.00 | OR BASIC FEE                  | 770.00     |
| X\$ 9=       |        | OR X\$18=                     |            |
| X43=         |        | OR X86=                       |            |
| +145=        |        | OR +290=                      |            |
| TOTAL        |        | OR TOTAL                      | <i>770</i> |

2-16-06 CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
|--|---|-------|---|--------------------------|
|  |   |       |   | MINUS 20                 |
| Total  | <i>4</i>                                  | Minus | <i>20</i>                                   | =                        |
| Independent                                    | <i>1</i>                                  | Minus | <i>3</i>                                    | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   | <input type="checkbox"/> |

| SMALL ENTITY     |                        | OTHER THAN<br>OR SMALL ENTITY |                        |
|------------------|------------------------|-------------------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                          | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | OR X\$18=                     |                        |
| X43=             |                        | OR X86=                       |                        |
| +145=            |                        | OR +290=                      |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE           |                        |

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
|--|---|-------|---|--------------------------|
|  |   |       |   | MINUS =                  |
| Total  |   | Minus |   | =                        |
| Independent                                    |   | Minus |   | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   | <input type="checkbox"/> |

| RATE             |  | ADDITIONAL FEE      |  |
|------------------|--|---------------------|--|
| X\$ 9=           |  | OR X\$18=           |  |
| X43=             |  | OR X86=             |  |
| +145=            |  | OR +290=            |  |
| TOTAL ADDIT. FEE |  | OR TOTAL ADDIT. FEE |  |

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA         |
|--|---|-------|---|--------------------------|
|  |   |       |   | MINUS =                  |
| Total  |   | Minus |   | =                        |
| Independent                                    |   | Minus |   | =                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |       |   | <input type="checkbox"/> |

| RATE             |  | ADDITIONAL FEE      |  |
|------------------|--|---------------------|--|
| X\$ 9=           |  | OR X\$18=           |  |
| X43=             |  | OR X86=             |  |
| +145=            |  | OR +290=            |  |
| TOTAL ADDIT. FEE |  | OR TOTAL ADDIT. FEE |  |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.